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Fax no.

703-872-9306

Number of pages

4 including cover page

Date

December 16, 2003

Concerning

App. No. 09/993,502

Sir:

Attached for filing in the above application are the following:

- Revocation of Power of Attorney with New Power of Attorney and Change of Correspondence Address (PTO/SB/82);
- Power of Attorney and Correspondence Address Indication Form (PTO/SB/81); and
- Certificate Under 37 CFR 3.73(b).

Respectfully submitted,

J. Timothy Meigs

Attorney for Applicant Registration No. 38,241

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PTO/SB/82 (09-03)
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## REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND

AND
CHANGE OF CORRESPONDENCE ADDRESS

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Application Number	09/993,502		ı .			
Filing Date	November 27, 2001					
First Named Inventor	Alan McClelland	l'a l'		E	١,	
Art Unit	1632					ED
Examiner Name	Scott David Priebe	CEMIN	Appa 1	rm.	A	
Attorney Docket Number	GTI 012.1U\$	DE(	ζ,	1 /	C.	200
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I hereby revoke all previ	ous powers of attorney given in t	ne above	identified applic	ation.	
A Power of Attorney is submitted herewith.					
OR			***************************************		
I hereby appoint the	practitioners associated with the Co	ustomer N	lumber:		
Please change the co	orrespondence address for the abov	e-identifie	ed application to:		
Customer Numb					
OR		**			
Firm or Linda R. Judge, Esq. Individual Name Cell Genesys, Inc.					
Address	500 Forbes Boulevard				
Address					
City	South San Francisco State California Zip 94080				
Country	Country United States of America				
Telephone	(650) 266-2922 Fax (650) 266-2940				
I am the:  Applicant/Inventor.  Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)					
	SIGNATURE of Applicant or	Assignee	of Record		
	s, Chlef Operating Officer				
Signature Justit	M. Lyns				
Date 16 Decen	ther 2003	Telepho	ne 301- 34	58-4667	
NOTE: Signatures of all the inventors signature is required, see below*.	or assignees of record of the entire interest or their	r representativ	ve(s) are required. Subm	it multiple forms if mor	e than one
*Total of 3 form	is are submitted.				

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## **POWER OF ATTORNEY** and **CORRESPONDENCE ADDRESS INDICATION FORM**

Application Number	09/993,502
Filing Date	November 27, 2001
First Named Inventor	Alan McClelland
Title	Gene Transfer with
Art Unit	1632
Examiner Name	Scott David Priebe
Attorney Docket Number	GTI 012.1US

I hereby appoint:	·	<del></del>				
Thereby appoint:						
Practitioners associated with the Customer Number:				1		
OR	<u></u>					
Practitioner(s) named be	low:					
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Name		Trogistration Number				
Linda R. Judge, Esq.	Linda R. Judge, Esq.		42,702			
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Country Telephone	United States of America	Fax	Loc	Loso, one pour		
l am the:	(650) 266-2922	rax	(65	50) 286-2940		
Applicant/Inventor.						
[ [m]						
Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)						
SIGNATURE of Applicant or Assignee of Record						
Name Russette M., Lyon F. Chief Operating Officer						
Signature Justitu. Kyn						
Date 16 December 301-358-4667			201-258-4667			
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.						
Total of 3	forms are submitted.					

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Atty. Dkt. No.: GTI 012.1US

## CERTIFICATE UNDER 37 CFR § 3.73(B)

Applicant(s):	Alan McClelland, Susan C. Stevenson, Mario Gorziglia, Elio F. Vanin			
Application No.:	09/993,502			
Filing Date:	November 27, 2001			
Name of Assignee:	Genetic Therapy, Inc.			
Type of Assignee (e.g. corporation, partnership, university, government agency, etc.):	Corporation			
The above-mentioned Assignee certifies that it is tapplication identified above by virtue of either:	he assignee of the entire right, title and interest in the patent			
<del></del>	r(s) of the patent application identified above. The assignment on November 3, 1997 at Reel 8776. Frames 0072, OR			
B. A chain of title from the inventor assignee as shown below:	or(s), of the patent application identified above, to the current			
1. From:				
To:				
The document was recorded in the Pa				
Reel: and Frame:	, or for which a copy thereof is attached.			
2. From:				
To:				
The document was recorded in the Pa				
Reel: and Frame:	, or for which a copy thereof is attached.			
Additional documents in	the chain of title are listed on a supplemental sheet.			
Copies of assignments or	other documents in the chain of title are attached.			
	cuments in the chain of title of the patent application identified e and belief, title is in the assignee identified above.			
The undersigned (whose title is supplied assignee.	d below) is empowered to sign this certificate on behalf of the			
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	be true; and further, that these statements are made with the			
	like so made, are punishable by fine or imprisonment, or both,			
	Code, and that such willful false statements may jeopardize the			
validity of the application or any patent issuing th				
14 N 1 10 mbs 2003	Landto W. Lyns			
Date	Signature			
-	Russette M. Lyons			
· ·	Name			
	Chief Operating Officer			
	Title			